

Docket No. 58463/JPW/LADApplicant(s): Harold J. Wanebo and Shashikant MehtaSerial No. : 09/287,884Examiner: J.D. AndersonFiled : April 7, 1999Group Art Unit: 1614For : COMBINATIONS OF CERAMIDE AND CHEMOTHERAPEUTIC AGENTS FOR INDUCING CELL DEATH AND USES THEREOF IN TREATING CANCER

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Date: February 22, 2010

Sir:

Transmitted herewith is an amendment to the above-identified application.

Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	26 -	* 28 =	*** 0 X	\$26	\$52	=	0
Independent Claims	6 -	** 8 =	*** 0 X	\$110	\$220	=	0
Multiple Dependent Claim(s) Presented For First Time Yes No				\$195	\$390	=	0
				TOTAL ADDITIONAL FEE \$ 0.00			

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Applicant(s): **Harold J. Wanebo and Shashikant Mehta**

Serial No. : **09/287,884**

Filed : **April 7, 1999**

Amendment Transmittal Letter

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The following are also enclosed:

One additional copy of this Amendment Transmittal Letter

Return Receipt Postcard

An Information Disclosure Statement, including Form PTO-1449
(Copies of citations included: Yes _____ No _____
and a fee of \$ _____ included)

A Petition for an Extension of Time, including a fee of
\$ **555.00** for a Petition for **3** Month(s) Extension of Time

Other (identify): _____

THE TOTAL FEE DUE IS \$ **555.00**.

A check in the amount of \$ **555.00** is enclosed.

Please charge Deposit Account No. _____ in the amount of
\$ _____.

The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment to Deposit Account No. **03-3125** as follows:

Fees under 37 C.F.R. §1.16 for the presentation of extra claims

Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

JP White ab2/10

John P. White	Date
Reg. No. 28,678	